

NO: _____

PAID _____ CHECK # _____ CASH DATE _____ BY _____ BC _____

LITTLE MISS & MISTER

NAME: _____

BIRTHDAY: MONTH: _____ DAY: _____ YEAR: _____ AGE: _____

PARENT (S) NAME: _____

ADDRESS: _____

PHONE# _____ Cell # _____

BROTHERS &/OR SISTERS: _____

HOBBIES/TALENTS: _____

FAVORITE THINGS TO DO: _____

FAVORITE FOODS: _____

WHEN I GROW UP I WANT TO BE _____

I certify that the above information is correct and I meet all the qualifications and understand the rules of the Little Miss & Mister Hardin County Fair Pageant!

Must have a copy of your birth certificate for age verification due to this pageant advancing on to the state level.

Parent/Guardian Signature _____ Date _____